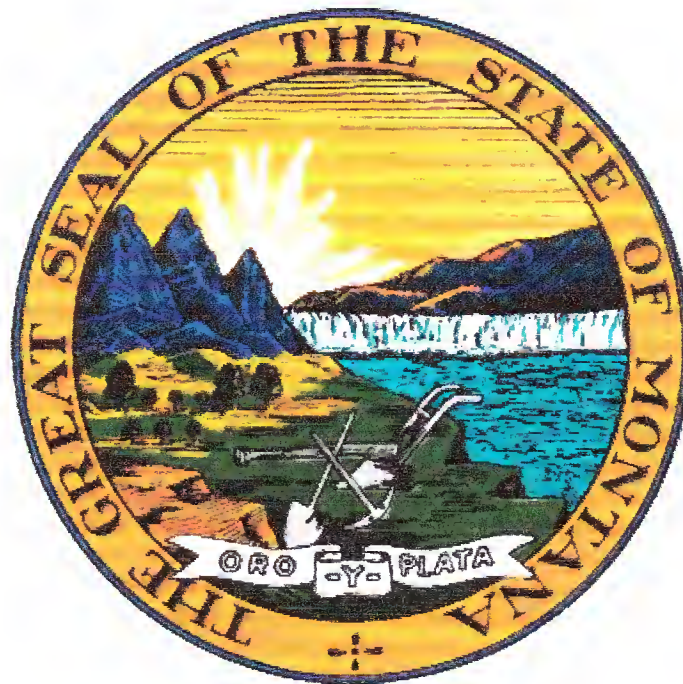


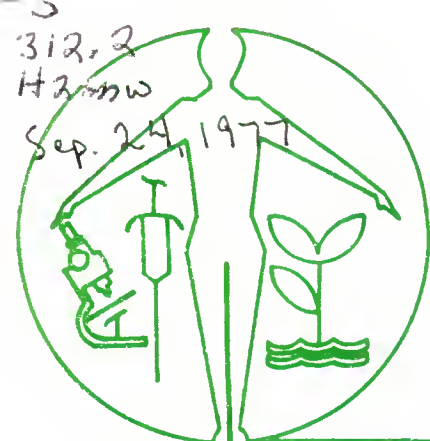
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MARTIN D. SKINNER, M.D.  
STATE EPIDEMIOLOGIST & CHIEF  
PREVENTIVE HEALTH SERVICES  
AREA CODE 406 449-2845

SHELVED WITH  
PERIODICALS

ARTHUR C. KNIGHT M.D.  
ACTING DIRECTOR



# Department of Health and Environmental Sciences

STATE OF MONTANA HELENA, MONTANA 59601

Week No. 38  
Ending September 24, 1977

## MORBIDITY REPORT

Disease	This Week			Reported to Date		
	1977	1976	1975	1977	1976	1975
Aseptic Meningitis	0	1	0	3	4	2
Brucellosis	0	0	0	2	1	0
Chicken Pox	3	4	3	567	839	766
Colorado Tick Fever	0	0	0	6	18	8
Encephalitis, Primary	0	0	1	2	2	6
Encephalitis, Post-Infectious	0	0	0	0	0	3
Hepatitis, Infectious (A)	14	0	10	118	31	194
Hepatitis, Serum (B)	1	0	0	17	12	23
Hepatitis, Unspecified	1	0	2	25	14	30
Influenza-Like Disease	6	25	34	1008	4946	2975
Measles (Rubeola)	0	0	0	1167	204	50
Meningococcal Disease	0	0	0	3	4	7
Mumps	0	0	1	10	21	28
Rocky Mountain Spotted Fever	0	0	0	6	1	4
Rubella	0	0	0	14	295	252
Salmonella Infections	3	1	2	28	63	46
Shigella Infections	0	0	0	7	31	57
Streptococcal Pharyngitis	76	73	32	2844	2510	2980
Tuberculosis (New Cases)	3	2	0	38	41	39
Venereal Disease						
Gonorrhea	65	47	81	1563	1506	1627
Syphilis, Prim. & Sec.	0	0	0	5	9	4
Whooping Cough Syndrome	0	0	0	1	4	13
Rabies in Animals	5	2	0	45	71	143

OTHER REPORTABLE DISEASES:

STATE DOCUMENTS

SEP 27 1977

# H

COUNTIES

	Aseptic Menin.	Chicken Pox	Enceph. Total	Gonorrhea	Hepatitis Inf.	Hepatitis Serum	Flu	Measles	Meningo- coccal Disease	Mumps	Rubella	StrepInf. Scarl. fev.	Salmon.	Shig.	T.B.	Animal Rabies
Beaverhead																
Big Horn				9			6					4				
Blaine												19				
Broadwater																
Carbon																
Carter																
Cascade		2		13	1							11	1			
Chateau																
Custer				1												
Daniels																
Dawson				1	6											
Deer Lodge																
Fallon																
Fergus				1												
Flathead																
Gallatin																
Garfield																
Glacier				10	2							7				
Golden Valley																
Granite																
Hill												5				1
Jefferson																
Judith Basin																1
Lake				1												
Lewis & Clark		1		2												
Liberty																
Lincoln																1
McCone																
Madison																
Meagher																
Mineral																
Missoula				12		1									1	1
Musselshell																
Park																
Petroleum																
Phillips																
Pondera																
Powder River																1
Powell												23				
Prairie																
Ravalli				1												
Richland																
Roosevelt																
Rosebud					5											
Sanders				1												
Sheridan																
Silver Bow				1												
Stillwater																
Sweet Grass																
Teton																
Taale				1												
Treasure																
Valley												7				
Wheatland																
Wibaux																
Yellowstone				10									2		2	
TOTAL	0	3	0	65	14	1	6	0	0	0	0	76	3	0	3	5

Delete 1 mumps - Sheridan County - week #37



MARTIN D. SKINNER, M.D.  
STATE EPIDEMIOLOGIST & CHIEF  
PREVENTIVE HEALTH SERVICES  
AREA CODE 406 449-2645

ARTHUR C. KNIGHT M.D.  
DIRECTOR

# Department of Health and Environmental Sciences

**STATE OF MONTANA** HELENA, MONTANA 59601

## EPIDEMIOLOGIC NOTES AND COMMENTS 'THE TICK TELEGRAPH'

September 27, 1977

TO: ALL HEALTH OFFICERS  
FROM: Dr. Skinner  
RECOMMENDATION FOR PERSONS TRAVELING TO THE MIDDLE EAST

The following memorandum was recently received from The Quarantine Division, Bureau of Epidemiology, Center for Disease Control, USPHS, and is reproduced in its entirety for your information. Please address any questions to this bureau.

"The World Health Organization has recently received confirmed reports of cholera in the Middle East in Jordan, Lebanon, Syrian Arab Republic, and Saudi Arabia. Other countries may be affected but confirmed reports have not been submitted to the World Health Organization.

The risk of cholera to United States travelers is small. There have been only 7 confirmed cases of cholera among United States travelers in the last 17 years. Generally speaking, travelers who stay in tourist accommodations on the usual tourist itinerary and who are careful about what they eat and drink will be at very slight risk of cholera. The best protection against cholera is for travelers to avoid potentially contaminated food and water by eating only cooked foods which are still hot, and by drinking only carbonated bottled water, carbonated soft drinks, beer and wine, and boiled water or water that they have treated themselves with chlorine or iodine drops or tablets.

Cholera vaccine is not very effective and should not be relied upon to protect travelers against cholera; however, during this outbreak a cholera vaccination and an International Certificate of Vaccination against Cholera may be indicated to facilitate travel across borders.

The United States has no cholera vaccination requirement. If returning travelers have severe diarrhea, the Quarantine Division may obtain a stool culture and allow the traveler to go on his way. Although some infected persons may enter the United States, there is little danger of transmission of cholera because cholera is transmitted through contaminated water or food and not person-to-person. The water supplies, sewage disposal, and food handling in the United States should be adequate to prevent secondary transmission of cholera within the United States."